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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/007,194	12/06/2001	Luc Desnoyers	GNE.2830P1C6	3544
35489	7590	03/01/2006	EXAMINER	
HELLER EHRMAN LLP 275 MIDDLEFIELD ROAD MENLO PARK, CA 94025-3506			HAMUD, FOZIA M	
			ART UNIT	PAPER NUMBER
			1647	

DATE MAILED: 03/01/2006

Please find below and/or attached an Office communication concerning this application or proceeding.



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Serial No. : 10/007,194
Applicant : Desnoyers et al.
Filing Date : December 6, 2001
Date Mailed : March 1, 2006

ACKNOWLEDGEMENT OF REQUEST

Notice of Allowance/Allowability Mailed

The request for a corrected notice of allowance/allowability, dated November 22, 2004, has been received by the U.S. Patent and Trademark Office. A corrected notice of allowance/allowability will not be mailed, but the Office has verified the following information, and made any necessary corrections to Office computer data:

- The inventorship has been corrected

A. Marty Willis
For the Office of Patent Publication



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BIBDATASHEET

Bib Data Sheet

CONFIRMATION NO. 3544

SERIAL NUMBER 10/007,194	FILING DATE 12/06/2001 RULE	CLASS 530	GROUP ART UNIT 1647	ATTORNEY DOCKET NO. GNE.2830P1C6
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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 09/946,374 09/04/2001 ABN
which is a CON of PCT/US00/04342 02/18/2000
which is a CIP of 09/403,297 10/18/1999 ABN
which is a 371 of PCT/US99/20111 09/01/1999
which claims benefit of 60/101,915 09/24/1998

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 03/19/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY CA	SHEETS DRAWING 249	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 1
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ADDRESS

35489
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275 MIDDLEFIELD ROAD
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TITLE
SECRETED AND TRANSMEMBRANE POLYPEPTIDES AND NUCLEIC ACIDS ENCODING THE SAME

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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